

OCT 31 2006

Atty Docket No. 019633-000127US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Sheridan Swope

Group Art Unit 1656

**OFFICIAL COMMUNICATION  
FOR THE PERSONAL ATTENTION OF  
EXAMINER Sheridan Swope**

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following documents in re Application of GILBERT and WAKARCHUK, Application No. 10/820,536, filed April 7, 2004 for NUCLEIC ACIDS ENCODING SIALYLTRANSFERASES FROM C. JEJUNI are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Fee Transmittal for FY 2006
2. Supplemental Response and Terminal Disclaimer Submission
3. Terminal Disclaimer

Number of pages being transmitted, including this page: 6

Dated: October 31, 2006

  
Mary Green

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2813

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PTO/SB17 (07-06)

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 130**Complete If Known**

Application Number	10/820,536
Filing Date	April 7, 2004
First Named Inventor	Gilbert, Michel
Examiner Name	Sheridan Swope
Art Unit	1656
Attorney Docket No.	019633-000127US

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**METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
-20 or HP = _____ x _____ = _____		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
-3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3		
<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	


**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer**Fees Paid (\$)**

130

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 51,868	Telephone 415-576-0200
Name (Print/Type)	Beth L. Kelly		Date October 31, 2006

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